| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004                                                                                                           |                                                |                                                                |                                        |                                |                          |                                    |       |                |                                        | 60              | 24,                                   | 385                    |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------------|----------------------------------------|--------------------------------|--------------------------|------------------------------------|-------|----------------|----------------------------------------|-----------------|---------------------------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)                                                                                                                                   |                                                |                                                                |                                        |                                |                          |                                    |       | SMALL E        | NTITY                                  | OR              | OTHER                                 |                        |
| TOTAL CLAIMS                                                                                                                                                                     |                                                |                                                                | ,                                      |                                |                          |                                    |       | RATE           | FEE                                    |                 | RATE                                  | FEE                    |
| FOR                                                                                                                                                                              |                                                |                                                                | NUMBER FILED                           |                                | NUMBER EXTRA             |                                    |       | BASIC FE       | E 150.0                                | <sup>∞</sup> OR | BASIC FEE                             | 300.00                 |
| TOTAL CHARGEABLE CLAIMS                                                                                                                                                          |                                                |                                                                | minus 20=                              |                                | •                        |                                    |       | X\$ 25=        |                                        | OR              | X\$50=                                |                        |
| INDEPENDENT CLAIMS                                                                                                                                                               |                                                |                                                                | minus 3 =                              |                                | •                        |                                    |       | X100=          |                                        | OR              | X200=                                 |                        |
| MU                                                                                                                                                                               | LTIPLE DEPEN                                   | IDENT CLAIM PI                                                 | RESENT                                 |                                |                          |                                    |       | +180=          |                                        | OR              | +360=                                 |                        |
| • 11                                                                                                                                                                             | the difference                                 | in column 1 is                                                 | ess than zero, enter "0" in column 2   |                                |                          | 1                                  | TOTAL |                | OR                                     | TOTAL           |                                       |                        |
|                                                                                                                                                                                  | С                                              |                                                                | MENDED - PART II (Column 2) (Column 3) |                                |                          |                                    | ı     | SMALL          | ENTIT                                  | ·<br>Y OR       | OTHER<br>SMALL                        |                        |
| AMENDMENT A                                                                                                                                                                      | MATOLO                                         | (Column 1)  CLAIMS  REMAINING  AFTER  AMENDMENT                |                                        | HIGH<br>NUM<br>PREVIO          | EST<br>BER<br>DUSLY      | PRESENT                            |       | RATE           | ADD<br>TION/<br>FEE                    | AL              | RATE                                  | ADDI-<br>TIONAL<br>FEE |
|                                                                                                                                                                                  | Total                                          | · Z                                                            | Minus                                  | -2                             | 5                        | - /                                | 1     | X\$ 25=        |                                        | OR              | X\$50=                                |                        |
| MEN                                                                                                                                                                              | Independent                                    | . 3                                                            | Minus                                  | •••                            | 7                        | = /                                |       | X100=          |                                        | OR              | X200=                                 | . /.                   |
| <b>V</b>                                                                                                                                                                         | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                                                |                                        |                                |                          |                                    | J     | +180=          | 1                                      | OR              | +360=                                 | 1                      |
|                                                                                                                                                                                  |                                                |                                                                |                                        |                                |                          |                                    |       | TOTAL          | -                                      | OR              | TOTAL                                 |                        |
|                                                                                                                                                                                  |                                                | (Oakuma 1)                                                     |                                        | (Colur                         | mn 2)                    | (Column 3)                         |       | ADDIT. FEE     | : L                                    |                 | ADDIT. FEE                            |                        |
| MENDMENT B                                                                                                                                                                       |                                                | (Column 1) CLAIMS REMAINING AFTER AMENDMENT                    |                                        | HIGH<br>NUM<br>PREVIC<br>PAID  | EST<br>BER<br>DUSLY      | PRESENT EXTRA                      |       | RATE           | ADDI<br>TIONA<br>FEE                   | L .             | RATE                                  | ADDI-<br>TIONAL<br>FEE |
|                                                                                                                                                                                  | Total ·                                        | •                                                              | Minus                                  | ••                             | 1                        | æ                                  |       | X\$ 25=        |                                        | OR              | X\$50=                                |                        |
|                                                                                                                                                                                  | Independent                                    | *                                                              | Minus                                  | ***                            |                          | =                                  |       | X100=          |                                        | OR              | X200=                                 |                        |
| A                                                                                                                                                                                | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                                                |                                        |                                |                          |                                    | J·    | +180=          |                                        | OR              | +360=                                 |                        |
|                                                                                                                                                                                  |                                                |                                                                |                                        |                                |                          |                                    | L     | TOTAL          |                                        | OR              | TOTAL<br>ADDIT, FEE                   |                        |
|                                                                                                                                                                                  | ٠.                                             | (Column 1)                                                     |                                        | . (Colur                       | nn 2)                    | (Column 3)                         |       | WUII. FEE      | ,                                      |                 | , , , , , , , , , , , , , , , , , , , |                        |
| AMENDMENT C                                                                                                                                                                      |                                                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                      |                                        | HIGH<br>NUMI<br>PREVIC<br>PAID | EST<br>BER<br>OUSLY      | PRESENT<br>EXTRA                   | ] [   | RATE           | ADDI<br>TIONA<br>FEE                   |                 | RATE                                  | ADDI-<br>TIONAL<br>FEE |
|                                                                                                                                                                                  | Total                                          | ٠                                                              | Minus                                  | **                             |                          | =                                  |       | X\$ 25=        |                                        | OR              | X\$50=                                |                        |
|                                                                                                                                                                                  | Independent                                    | **************************************                         | Minus                                  | ***                            | ·                        |                                    |       | X100≖          | 1.                                     | OR              | X200=                                 |                        |
| 4                                                                                                                                                                                | FIRST PRESE                                    | NTATION OF MU                                                  | JLTIPLE DE                             | PENDENT                        | CLAIM                    |                                    | 1 }   |                |                                        | 7               |                                       |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." |                                                |                                                                |                                        |                                |                          |                                    |       | +180=<br>TOTAL |                                        | OR<br>OR        | +360=                                 |                        |
| **!                                                                                                                                                                              | the Highest Nu                                 | mber Previously Pa<br>mber Previously Pa<br>ber Previously Pal | ild For IN TH                          | IS SPACE I                     | s less the<br>a less the | in 20, enter 20<br>In 3. enter 3.° |       | VOOIT. FEE     | ــــــــــــــــــــــــــــــــــــــ |                 | ADDIT. FEE                            |                        |